|  |                               |            |          | Application or Docket Number |          |                              |                        |
|--|-------------------------------|------------|----------|------------------------------|----------|------------------------------|------------------------|
| PATENT APPLICATION   | ECORD                         | - 9/837041 |          |                              |          |                              |                        |
| CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)   |                               |            | SMAI     | TEMILLA                      | OR       | OTHER THAN<br>R SMALL ENTITY |                        |
| TOTAL CLAIMS   | 38                            |            | RA       | TE FEE                       |          | RATE                         | FEE                    |
| FOR  | NUMBER FILED                  | NUMBER EXT | EAST     | FEE 355.0                    | OR       | Basic Fee                    | 710.00                 |
| TOTAL CHARGEABLE CLAIMS  | 38° minus 200                 | · 18       | xs       | 90                           | ОЯ       | X\$18=                       | 324                    |
| INDEPENDENT CLAIMS   | 9 minus 3 -                   | ' /        | ×4       | » —                          | OR       | X80=                         | 80                     |
| MULTIPLE DEPENDENT CLAIM PRESENT   |                               |            | ]   +13  |                              | 7        | +270=                        | 00                     |
| " If the difference in column 1 is less than zero, enter "0" in column 2   |                               |            |          |                              |          | TOTAL                        | 1116                   |
| L. Lu CLAIMS AS A  | 101                           | ~          |          | OTHER                        |          |                              |                        |
| Column 1) (Column 2) (Column 3)  |                               |            |          | LL ENTITY                    | OR       | SMALL                        |                        |
| COUNTY REMARKING AFTER AMERICMENT Total Independent  | HEGH<br>MUM<br>PREVIX<br>PAID | BER PRES   |          | TE TIONA                     |          | RATE                         | ADOI-<br>TIONAL<br>FEE |
| Total  | Minus / / /                   | 1 13       | x        | <b>}</b> =                   | OR       | X\$18=                       |                        |
| rindependent FIRST PRESENTATION OF MI  | Mines O GL. U                 |            | <b>₹</b> | -                            | OR       | X80=                         |                        |
| THE PROPERTY OF MALLIFE DEPENDENT COMM   |                               |            | +13      | io ei                        | OR       | +270=                        |                        |
|  |                               |            |          | YAL                          | OR       | TOTAL<br>ADOIT, FEE          |                        |
| (Cotumn 1)   | in 3)                         |            |          | ,                            | ٠        |                              |                        |
| REMARKING AFTER AMENDMENT Total Independent  Total  Total | HIGH<br>NUM<br>PREVIC<br>PAID | MER PREBI  |          | ADDI-<br>TIONA<br>FEE        |          | RATE                         | ADDI-<br>TIONAL<br>FEE |
| Total · 6  | Minus 3                       | 8 - 1      | xs s     | - 1                          | OR       | X\$18=                       |                        |
| tridependent • 2 FIRST PRESENTATION OF MIL   | Minus (                       | CLAIM T    | X40      | - 11                         | ОЯ       | X80=                         |                        |
| 9-7-05   |                               |            |          | - /                          | OR       | +270=                        |                        |
|  |                               |            |          | æL                           | _OR      | TOTAL<br>ADDIT, FEE          |                        |
| (Column 1) CLAIMS SEMANTING  | (Colum                        | 251        |          |                              | <b>.</b> |                              |                        |
| AFTER  | PREVIO<br>PAID I              | USLY FATE  |          |                              | .        | RATE                         | ADDI-<br>TIONAL        |
| Total  | Minus · //                    | 2 - /      | XSS      | FEE                          |          | X\$18=                       | FEE                    |
| Independent •  | Minus                         | - 1        | X40      |                              | OR       |                              |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                               |            | □├─      | <del>-</del>                 | OR       | X80=                         |                        |
| * If the entry in column 1 is less than the entry in column 2, write 'V' in column 3.  |                               |            |          |                              | OR       | +270=                        |                        |
| "If the Highest Number Previously Paid For IN THIS SPACE to less than 20, enter 20." ADDIT, FEE ADDIT, FEE ADDIT, FEE  |                               |            |          |                              |          |                              |                        |
| The "Highest Humber Previously Paid For" (Total or Independent) is the Highest number tound in the appropriate box in column 1.  |                               |            |          |                              |          |                              |                        |
| ORM PTO-673  |                               |            |          |                              |          |                              |                        |